

Losing Our Minds to Madness: Paradigm Changes in Western European Perceptions of Mental Illness

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Emily Dickinson's famous poem of social critique, "Much madness is divinest sense," echoed a sentiment that had a large, transcendent influence on my own understanding of madness.¹ Dickinson's assertion that madness has been continually stigmatized due to the dichotomy between 'reason' and the dangerous, animalistic state of 'unreason' remains one shared by at least some Enlightenment scholars of centuries past. However, this idea has been relatively unfounded amongst most of the renowned historians within the discourse today, such as Michel Foucault and Roy Porter. These scholars only sparingly acknowledged the idea of some underlying relationship between the "mad" and society. To name a few, these historians tend to focus on personal nuances to present arguments within the discourse, such as those about power relations within societal hierarchies supporting the scrutinization of madness, in Foucault's case, or simply retelling the history of madness with no care to outline any complex relationship between society and the mad themselves, in Porter's case. For the most part, these same historians have ignored subsequent questions stemming from the proposed relationship, the most important of those being: How did society come to perceive this relationship over time, and how has it developed in various civilizations from different eras throughout the recorded history of Western Europe? What is "madness" if society cannot create a stable definition or idea that endures and persists throughout recorded history? Is madness perhaps an indefinable, metaphysical concept that will forever remain part of western society's continually transforming lexicon?

Upon making the discovery that most of the present scholarship surrounding this discourse had inadvertently avoided these queries, I sought to answer three primary questions that are meant to supplement the current scholarship, however, they are also my attempt to fill any remaining holes or

¹ Much Madness is divinest Sense -
 To a discerning Eye -
 Much Sense - the starkest Madness -
 'Tis the Majority in this, as all, prevail -
 Assent - and you are sane -
 Demur - you're straightaway dangerous -
 And handled with a chain -

discrepancies within the discourse: What are the major paradigm changes in the perceptions of madness within varying periods throughout the recorded history of Western Europe, why did these shifts in thought arise and what effects did they have on the relationships between the mad and the rational, and most importantly what *is* madness as a social, biological, and psychological concept?

To the first two questions concerning the changing periods of thought, I argue that there have been four major periods of paradigm change towards the construction of ‘madness’ within the recorded history of Western Europe. Each shift seemed to come about in direct relation to changing thought surrounding reason and the value of the human mind according to some semblance of unified thought across nearly all regions of Western Europe. My argument answering the last and most important question, however, grew to be quite complicated, thus requiring a more complex explanation. Madness itself remains an indefinable and uncertain concept that scholars can merely theorize about but never truly understand through a metaphysical, much less historical lens. The relationship between the “mad” and a “rational society” mirrors closest to Michel Foucault’s theory—explained in one of the paragraphs below—but still differs in the way that I believe inherent human nature incites society to shut away and push aside all that is unknown or unfathomable to them. This, in turn, also causes those with—rather loosely defined “reason” to unconsciously set themselves apart from those who exhibit animalistic tendencies of “unreason.” Thereby, this conflict forever perpetuates an unbreakable opposition between the two, bound by the idea of a desired normality. In many ways, it simply remains a *human* construct as opposed to what Foucault and other scholars argue as a complex *social* construct upheld by a hierarchy of power.

To develop and support my thesis throughout this paper, I first attempt to take the previous historiography surrounding madness—along with my initial thoughts when undertaking this project—in order to argue for a preliminary concept of what we know as madness. This allows for some background context as well as framing the paper leading up to my discussion of the paradigm changes throughout

various key periods in the recorded history of Western Europe. Explaining these paradigm changes, why they took place, and how they fit within the historical context of the periodized eras will help to better understand the preliminary concept while continuing to build upon it. Finally, I will close the paper by re-approaching that preliminary concept while synthesizing the newly-found information to discuss the meanings and relationships—between society and the mad—that lay within the continually shifting concept of madness, one that continues to perplex historians.

Parameters, Periodization, and Methodological Framework of the Research

Before delving into the bulk of the paper, I feel it is most appropriate to preface the research ahead with a few disclaimers, an explanation of omissions, deliberately narrowed parameters, and the like. It should first be noted that my periodization is unorthodox compared to many other projects of this magnitude. Madness throughout recorded history contains a broken temporal framework paired with a general lack of primary sources that have survived the test of time. As such, historians primarily work with secondary sources or other popular, primary works that have been re-published over time such as the *Hippocratic Corpus*. However, these are generally still few and far between with fictional literature and film now superseding historical sources in controlling the brunt of work within the discourse surrounding madness. This combination makes periodizing madness in such a small frame of time—say, madness in the asylums of Victorian England from the 1880's to the 1890's—virtually impossible due to a lack of sources necessary to create a sufficiently detailed and lengthy paper. This is made even more difficult by the fact I have come to realize that something as psychologically complex as madness remains difficult to place within a single time period, particularly in a vacuum. Madness, in any sense of the word or concept, transcends small periods of time with its complexities and various nuanced understandings. I also came upon the realization that it remains best to study and understand madness comparatively between *eras* of thought that produced competing and evolving perceptions of madness.

With that said, an explanation of the timeline that I chose to use is needed to understand the periods I discuss later in this paper. Roy Porter, one of the most renowned and accomplished writers within the discourse surrounding madness, argued that the relative idea of ‘madness’ may be as old as man itself, considering the archaeological evidence of fossilized skulls with holes bored in them by ancient flint tools. This was a tradition that continued for centuries, evolving even into the Age of the Asylum and one that is evidenced in the picture here, on the left side of the page.² With that said, the



present field lacks in sources and evidence if one were to focus on a narrow time frame when researching madness, as evidenced in writers like Michel Foucault and Roy Porter writing projects that span *centuries*. Porter, himself, even admitted the general lack of sources for madness to be focused into a short span of research.

Understanding and acknowledging this, I made the decision to take the same route as Foucault and Porter in researching long periods of time while periodizing the eras of paradigm changes in thought towards madness. This is best represented in the Annales school’s “longue duree” historical methodology. In an effort to make the time spans of research more reasonable, I attempt to focus specifically on the concept of madness and its relation to society during the time of my research instead of adopting a temporal framework where I might focus on change directly over time.³ This lens allowed me to focus on long-term, slowly evolving historical structures with the intention of drawing conclusions from larger historical trends and patterns. By periodizing my research into four distinct eras of change, I allowed myself to look at cause-and-effect over large periods

² Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 10.

³ Anna Green and Kathleen Troup, *The Houses of History: A Critical Reader in History and Theory, Second Edition* (Manchester: Manchester University Press, 2016), 106.

of time while not overloading the paper with information that would inevitably seem insignificant in relation to the length of history researched.

Lastly, to also narrow the paper's scope to a reasonable status considering the large span of time that I periodize throughout the paper, I focus solely on major centers of western European thought; particularly the territories of what would become modern-day England, Spain, France, Italy, Greece, and Germany. This is not for a lack of care towards other nations and territories, rather the larger and more affluent territories such as the aforementioned ones simply supply more evidence as to how the concept of madness developed over time. Just as well, certain eras focus on reasonably specific areas due to the influence that certain civilizations had on the development of madness. For instance, the first era of paradigm change discussed in a later paragraph entails classical theory and the age of Hippocratic medicine where the classical Greek and Roman worlds are relatively the only areas discussed due to their contributions to the medical field far outweighing any other civilization at the time. Likewise, some eras require no direct focus on area, as for the most part all areas of Western Europe generally follow the same concepts concerning madness. Also, I see no reason to gender the research in this paper as, for the most part, madness remained evenly split amongst males and females for most of the history presented below. As such, this is not for a lack of care towards any areas or peoples, it merely remains a way for me to reasonably narrow the scope of my research while supplying the most complete and objective history possible of paradigm changes within the discourse surrounding madness.

Preliminarily Defining Madness and the Problems That Arise

Madness: the state of being mentally ill, exhibiting extremely foolish behavior, perpetual state of frenzied, erratic, or chaotic behavior. These are just some ways that the western world has attempted to *officially* define this seemingly elusive phenomenon. However, madness throughout recorded history transcends mere raw definitions. Before delving into the periods of change in the construction of madness and its relationship with society, it is appropriate to make an attempt at defining madness as a

historical concept, primarily based on the present historiography and what I have seen in my research thus far. Then, and only after objectively looking at the history of paradigm changes towards the construction of madness, I will construct my own idea of madness according to the research that this paper encompasses. It is only with attempting to make a base-concept around madness that a historian can then move on to explain its history.



Madness has and will continue to be a nearly impossible concept to study, define, and delineate societal relationships that stem through it. This is not only due to the size and scope of the innumerable cases of madness throughout recorded history in tens of thousands of societal histories. Madness is so difficult to define and wrap our minds around because, as Renaissance historian Carol Neely argues, most history surrounding madness is a “black hole” marked with many hiatuses while madness, in essence, is an absence of the human “self.”⁴ In a way, this makes madness quite a difficult concept for historians to discuss, much less come to a universal definition or understanding of madness’ implications as a “disease” or serious problem. A major part of this issue is the standing historiography surrounding the discourse of madness and the many nuances and disagreements that historians have continually taken towards each other and towards the concept of madness itself. With that said, it is important to outline a very brief, present historiography to understand a proper concept of madness for the time-being until it is discussed at length, in my own thoughts, towards the end of this paper.

⁴ Carol Thomas Neely, “Recent Work in Renaissance Studies: Psychology, Did Madness Have a Renaissance?,” *Renaissance Quarterly* 44, no. 4 (Winter 1991): 779.

Admittedly, while the historiography obviously contains many scholars and their thoughts, the two primary arguments towards the conception of madness throughout history can be boiled down to the followers of Michel Foucault's early poststructuralist arguments and the followers of Roy Porter's sociological arguments. Concerning the former, it can be argued that renowned French philosopher Michel Foucault was and remains the forerunner for the modern discourse surrounding perceptions of madness throughout recorded history. Foucault's underlying thesis did not concern a broad history of madness but was instead focused on the notion and symbol of what he calls "power-knowledge."⁵ Foucault's understanding was that systems of authority in science, psychology, and philosophy as well as systems of power in institutions of justice and discipline are inextricably linked and equally responsible for how society functions, which includes how "madness" is perceived and treated. Focusing on a key event that shaped this thinking, the "Great Confinement" proved to him that madness was something shut away from the world in "houses of confinement" where the combined forms of reason and judicial authority were exercised to punish the mad.⁶ Being mad was loosely defined and most of those condemned were hardly mentally ill. In fact, in most cases, the condemned were simply impoverished, small-time criminals, or otherwise deemed degenerates of sorts.⁷ If it was not obvious to the audience already, madness was entirely a social construct due to the inconsistencies of imprisoning the mad. Just as well, to Foucault, madmen seemed to evoke a hidden knowledge, reason, and something that threatened those in power while the concept of madness itself was constructed in a period that valued normality, work efficiency, and reason while punishing animality and unreason.⁸

While the immediate response to the poststructuralist view of the history of madness was met with equal respect, and in some cases more additive poststructuralist perspectives, the turn of the 21st century

⁵ Michel Foucault, *History of Madness*, edited by Jean Khalfa, translated by Jonathan Murphy and Jean Khalfa (New York: Routledge, 2006), 49.

⁶ Ibid., 48.

⁷ Ibid., 55.

⁸ Ibid., 19.

brought social histories into the fold starting with Roy Porter's universally respected *Madness: A Brief History*. The poststructuralist view, for many historians, lacked a delicate approach to socially-accepted views of madness and in particular a view of the mentalities within various societies and eras that caused madness to be viewed in the ways that it was. Porter intended to track both the historical and historiographical background of madness as they had been perceived in various institutions, societies, and eras. Instead of attempting to decode the symbol and construction of 'madness' as Foucault and his contemporaries did, Porter outlined a slightly more chronological history while focusing on sociological aspects of madness. Curiously enough, however, the actual relationships between society and the mad were lost on both sets of scholars.

Porter desired to know how and why societies viewed madness in the various ways that they did, and as opposed to Foucault he was not concerned with any ambiguity towards madness, instead taking it for face-value.⁹ Just as well, Porter tracked *who* the 'mad' were, *why* they were treated as the 'other', and *what* effects this had on them through a mentalités-oriented lens.¹⁰ Finally, Porter primarily criticized the poststructuralist view—and Foucault himself—for writing not about madness as the disease, the societal issue, and its treatment, but rather wrongly “of questions of freedom and control, knowledge and power.”¹¹ In the end, while Porter offered no solid definition of madness, so it remains the responsibility of other scholars and readers to glean what he thought about madness through the actual history itself.

In a way, Foucault and his followers are largely at fault for the nuances and unknowns towards a concept for madness due to the widespread success and subsequent critiques of his focus on institutional confinement, epistemic breaks in historical knowledge, and his “idealization” of the Middle Ages. These are particularly evident in his misuse of geographical barriers concerning the perception madness,

⁹ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 34.

¹⁰ *Ibid.*, 9.

¹¹ *Ibid.*, 3.

causing a narrowed view of France being a much larger player in the discourse than most other historians would view amongst the larger Western European background.¹² As such, how can one take the past historiography and theories about madness seriously if the historians themselves cannot take an argumentative stance towards madness, which is evident in Roy Porter's complete denial of a strict concept for madness and Foucault's flawed arguments.¹³ In my opinion, and as other historians would stand strongly by me, no *acclaimed* historian has yet made a complete and satisfactory argument for a concept surrounding madness and the subsequent societal relationships that stem from the mad's place in human civilization.¹⁴

In this same way, the history of madness is littered with stories of reason's "progressive conquest" and the consistent, everlasting repression of anything that opposes the normality that is reason.¹⁵ Foucault and Porter have done enough to nuance and over-complicate the concepts of madness that most historians would blindly follow in attempts to further nuance and make their own. The problem of defining madness in this way, as most modern historians tend to do, is that it further distorts rather than clarifies a concept that is already confusing enough to the very people that apply a derogatory term and punishments to a mental or medical condition that they do not understand.¹⁶ On top of all this, it is—or at least should be—widely accepted that the western construction of madness is specific to its own worldview, exemplified by the development of Enlightenment reason, science, inductive logic, and an inherently reductionist reality.¹⁷ As I begin to construct the history of paradigm changes concerning the creation of a concept for madness and the subsequent societal relationships that

¹² Carol Thomas Neely, "Recent Work in Renaissance Studies: Psychology, Did Madness Have a Renaissance?," *Renaissance Quarterly* 44, no. 4 (Winter 1991): 779.

¹³ B. Keith Putt, *The Essential Caputo: Selected Writings* (Bloomington: Indiana University Press, 2018), 169.

¹⁴ Joseph Scalzo, "Campanella, Foucault, and Madness in the Late-Sixteenth Century Italy," *The Sixteenth Century Journal* 21, no. 3 (Autumn 1990): 362.

¹⁵ Shoshana Felman, "Madness and Philosophy or Literature's Reason," *Yale French Studies* 52 (1975): 209.

¹⁶ Joan Busfield, "The Female Malady? Men, Women, and Madness in Nineteenth Century Britain," *Sociology* 28, no. 1 (February 1994): 259.

¹⁷ Jonathen Appel et al., "Creativity and 'Madness': Myths, Constructions and Realities," In *The Social Constructions and Experiences of Madness*, ed. Monika dos Santos and Jean-Francois Pelletier (Leiden: Brill Publishers, 2018), 102.

develop from these changes, I will eventually come back to this question of whether a historian can reasonably define or universally agree on a concept for madness and what that might even look like considering the aforementioned parameters, present historiography, and the overall research within this paper.

Classical Theory and Hippocratic Medicine (5th-4th c. BCE)

It has often been argued that a human concept of “madness” might be as old as man itself.^{18 19 20}

For, as far back as our discoveries of ancient human remains go, archaeologists have found skulls with holes bored in the tops of them, most likely made by stone tools, which would subsequently date them



back thousands of years.²¹ This was mentioned as such earlier in the paper. Historical researchers and archaeologists have thought of no reason why this kind of experimentation with madness could not have gone further back in human history. Along these same lines, many scholars claim that understandings and conceptions madness can indeed be argued to

have existed for centuries within early religious dialogue, such as Old Testament stories concerning people like Nebuchadnezzar. In his case, Nebuchadnezzar was cursed by the gods for burning down a Jewish temple in 6th century BCE, causing him to go mad. He “did eat grass like oxen, and his body

¹⁸ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 10.

¹⁹ Petteri Pietikainen, *Madness: A History* (New York: Routledge, 2015), 16.

²⁰ Andrew Scull, *Madness in Civilization: A Cultural History of Insanity from the Bible to Freud, from the Madhouse to Modern Medicine* (London: Thames & Hudson, 2015), 16.

²¹ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 10.

was wet with the dew of heaven, until his hairs were grown like eagles' feathers, and his nails like birds' claws.²²

I argue that there was not a sufficient concept being researched and argued towards the understanding of madness until the scientific and medical research—however correct or incorrect—that was accomplished with the *Hippocratic Corpus* in Classical Greece. What makes the Greek understanding of madness unique was the deliberate attempt to place madness in the same vein as disease and other physiological issues, to place it in direct relation to the body and the human mind. Writers within the corpus began to understand madness as a disease stemming from complications within the human body itself as opposed to being divinely-struck or mystically appearing seemingly out of nowhere as previous concepts had shown. This new way of understanding madness subverted the aforementioned methods by attempting to *completely* understand madness as opposed to applying the same argument of “divine punishment” that stemmed from most medical diagnoses before the advent of Hippocratic medicine. As such, I argue that for the reasons listed above, the Hippocratic concept represents the first major shift in the paradigm changes of perceptions surrounding madness that this paper is concerned with.

Hippocratic methods set the stage for mainstream western medicine, with some methods such as the humoral understanding of the human body perpetuating even into the 19th and early 20th centuries when what we know as modern medical practices began to arise.²³ While scholars are unsure how madness fits into the *Hippocratic Corpus* in early writings, I believe the first direct encounters with madness can be attributed to writing on “The Sacred Disease.”²⁴ This was the Hippocratic way of bridging previous ideas of divinely struck madness and both Greek medical and scientific

²² Andrew Scull, *Madness in Civilization: A Cultural History of Insanity from the Bible to Freud, from the Madhouse to Modern Medicine* (London: Thames & Hudson, 2015), 19.

²³ Ibid., 14.

²⁴ J. Chadwick and W.N. Mann, “The Sacred Disease” in *Hippocratic Writings*, ed. G.E.R. Lloyd, trans. J. Chadwick and W.N. Mann (New York: Penguin Classics, 1987), 237.

understandings of how the mind works in conjunction with the rest of the body.²⁵ In this way, the brain began to be seen as the center of mental activity. This was the first major sign of a paradigm shift in belief as previous religious ideas of mental activity centered around how the supernatural deity affects a person directly.²⁶ The idea of the Sacred Disease denied that a god can pollute the body, and this disease stems from an imbalance in the humors, a typical explanation for Hippocratic medicine.²⁷

If taking a poststructuralist lens to this era of paradigm change, the corpus inspired the first attempts to build other words and visual concepts around “madness” in the Greek lexicon. Words like “mania,” and other Greek counterparts such as “menos,” “oistros,” and “lyssa,” appeared during this era and persisted throughout recorded history moving forward in the discourse.²⁸ Along with the beginning of a more complex lexicology, visual representations in creative pottery vase-painting became widely popular in 5th century BCE Greek culture. Generally symbolized in the image of gods such as Dionysis, madness was sometimes represented and referred to as “Dionysiac frenzy.” In this case, we see the first socially constructed concepts of madness in that Dionysiac frenzy was the manic state of “personal alienation from accepted social and political conduct.”²⁹ Just as well, and a relatively worrying fact for future perceptions of madness, 5th century BCE vase painting began to show violent tendencies in the mad with images of Dionysis tearing apart animals in a frenzy or Lykourgos killing his son and watching his dead body.³⁰

More important than the paradigm change itself were the effects that this explanation of the Sacred Disease had on future understandings of madness. The symptoms and medical explanations given for the disease set the framework for how future western thought viewed madness. These

²⁵ Ibid., 241.

²⁶ Petteri Pietikainen, *Madness: A History* (New York: Routledge, 2015), 19.

²⁷ J. Chadwick and W.N. Mann, “The Sacred Disease” in *Hippocratic Writings*, ed. G.E.R. Lloyd, trans. J. Chadwick and W.N. Mann (New York: Penguin Classics, 1987), 240.

²⁸ Eurydice Kefalidou, “The Iconography of Madness in Attic Vase-Painting,” in *Athenian Potters and Painters, Volume II*, ed. John H. Oakley and Olga Palagia (Oxford: Oxbow Books, 2009), 91.

²⁹ Ibid., 91.

³⁰ Ibid., 95

symptoms included, but were not limited to, loss of voice, choking, foaming at the mouth, clenching of the teeth, convulsive movements, and otherwise confusion of the mind.³¹ While previous ideas of madness included these symptoms, the medical explanations in the *Hippocratic Corpus* finally applied the symptoms directly to medical conflicts *inside* the body directly between the brain and other organs in the form of humoral imbalance.³² All of this culminated in a complete change-of-pace in the medical world, the first paradigm change of how humanity views madness as a concept and phenomenon. What was to come, however, would be a societal turn and subsequent paradigm change *against* the mad.

Bridge Period and Mix Between the Divine and the Hippocratic Explanations (1st-16th c. CE)

While Christian societies in Western Europe honored Hippocratic medicine due to its traditionally widespread use and understanding, throughout many centuries following the beginning of the common era these same societies began to mix traditional Hippocratic medicine with previous



religious beliefs that were thought to have fizzled out in the 4th and 5th centuries BCE.³³ This era, though occurring over many centuries until the Enlightenment, represents the second great paradigm shift in the perception of madness due to widespread returning beliefs that madness was divinely struck, thereby opposing the Hippocratic beliefs that had previously denied any polluting interference from deities.

As the common era continued along, traditional Hippocratic medical beliefs seemed to lose their shine. As Roy Porter explains, “Simplified Christian learning was intermingled with folk beliefs and

³¹ Ibid., 243.

³² Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 16.

³³ Ibid., 49.

magical [supernatural] remedies.”³⁴ Part of this was due to the obvious fall of the previously influential empires and the rise of new, so-called “Successor States” developing their societies along what they know best: faith in God(s).³⁵ Melancholy and mania began to be explained by a mixture of an imbalance in the humors and divinely struck punishment, if you will, by the God(s) of a given society. Another cause of the aforementioned change was the turn towards viewing madness as “unreason” as opposed to society not being able to pinpoint what exactly the dangers of madness were.³⁶ Just as well, a major feature of this paradigm change was the shift in mindset for how one can care for the mad. To societies during this long era of change, it is rather jaded as to what kind of care the mad need and how much responsibility those who are normal and rational should even have. As a result, society began to turn away from the mad because they did not understand it, which opposed previous Hippocratic beliefs that the mad should be studied and dealt with medically.

It would be impossible to track the long history of every source that represents this paradigm change. In an effort to subvert tracking hundreds “madness” cases while staying within the periodization, it is helpful to give two specific examples in which this paradigm change—particularly the fact that society had turned away from the mad—is most rife within the given period. One example of how medieval society—especially in the 14th to 15th centuries—dealt with the mad in the case of Emma de Beston, a well documented and lengthy British court battle in 1383 that was meant to assess de Beston’s state of mind to prove whether she was mad and needed further treatment. This case went back-and-forth with the court deciding that she was mentally sane, yet unstable. They inquired into different factors of her life such as how she interacted with neighbors, sleep patterns, general intelligence, and other questions to test if she was of “sound mind.”³⁷ The various judges decided on the

³⁴ Ibid., 49.

³⁵ Andrew Scull, *Madness in Civilization: A Cultural History of Insanity from the Bible to Freud, from the Madhouse to Modern Medicine* (London: Thames & Hudson, 2015), 48.

³⁶ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 50.

³⁷ Christine Roffe and David Roffe, “Madness and Care in the Community: A Medieval Perspective,” *British Medical Journal* 311, no. 7021 (December 1995): 1708.

state of her mind based on whether she exhibited signs of divinely struck lunacy in the aforementioned aspects of her life. These included, but were not limited to, convulsions, misunderstanding of general societal truths like how much currency is worth, and how she saw herself fitting into society as an individual, which was shown by her arrogance or lack thereof in connection to her innocence. Inevitably, de Beston was declared mad and had her personal capital and belongings stripped away from her entirely.³⁸

This was generally the way that medieval societies throughout Western Europe operated. Along with the removal of capital, protocol and precedence dictated that the declared was to be on house-arrest, shut away from society so that they may not be a danger or influence—perhaps infect—others with their madness.³⁹ This case of medieval society proves how different the perspectives towards madness were during this era compared to when Hippocratic medicine dominated the medical world. The courts would forcibly make the mad stay on house-arrest with their families watching over them out of *fear* that the mad would roam and inflict damage to society. However, this blind perspective did not create or enforce some kind of shadow hierarchy with underlying power relations as some poststructuralist scholars like Foucault might argue.⁴⁰

The second of the two examples best represents how Hippocratic and religious ideas about madness mixed in this era. Tommaso Campanella was imprisoned and tortured for 27 consecutive years starting in November of 1599 while on trial for heresy in his supposed “madness” by the Inquisition.⁴¹ More important than Campanella himself and his case was the fact that the Inquisition began to show society’s view that madness is “animality” and “unreason,” a point that had previously been attributed to humoral imbalance and/or divine punishment.⁴² An idea begins to appear here that would perpetuate and

³⁸ Ibid., 1709.

³⁹ Ibid., 1710.

⁴⁰ Ibid., 1711.

⁴¹ Joseph Scalzo, “Campanella, Foucault, and Madness in the Late-Sixteenth Century Italy,” *The Sixteenth Century Journal* 21, no. 3 (Autumn 1990): 359.

⁴² Ibid., 360.

further develop through the final two eras of paradigm change that are discussed later in this paper. This idea was that “the madman was not a sick man,” rather he was a beast, the epitome of animality within a human.⁴³ This new idea was upheld and developed because of the shifting ideals within the mixing period that saw less validity in just religious or Hippocratic ideals and more validity into new hybrid thoughts that combined aspects of the two. Namely, these were the idea that madness should be shut away and avoided, in Emma de Beston’s case and the more religious argument, and madness should also be viewed as something concrete and actually *wrong* with a human or their human nature, in Campanella’s case and the more Hippocratic argument. Upon looking closely, one can see how similar Foucault’s examples of the supposed “madmen” were to Emma and Campanella in that they were never truly proved to be mad by the sense of the word that one might understand. However, for their differences, they were ostracized anyways.

Towards the end of the 16th century, just before Enlightenment ideals began to replace Medieval ones concerning long-held beliefs about madness, a different and unique development in dealing directly with the mad began to arise in Medieval France, Germany, and England that would inevitably spell the beginning of Enlightenment institutionalization of the mad. Historians like Michel Foucault argued for the theory that Medieval and Feudal societies hastily rid themselves of the mad; take the “Ship of Fools” for example.⁴⁴ In this way, and rather tepidly as historian of Medieval Europe Erik Midelfort describes it, the mad began to be kept in both protective custody in homes and also converted monasteries that worked as homes for the mad whose families refused to keep them. The asylums that would become infamous during the Enlightenment—which is discussed later—were generally founded out these monasteries that had begun to accept, only on a voluntary basis, mad individuals that were willing to do honest work in exchange for being taken care of with plenty of fine foods, beer, fresh water, and a clear

⁴³ Ibid., 362.

⁴⁴ Midelfort, H.C. Erik. “Madness and the Problems of Psychological History in the Sixteenth Century.” *The Sixteenth Century Journal* 12, no. 1 (Spring 1981): 6.

mental space with a welcoming environment.⁴⁵ Only due to a shift and schism in Enlightenment reasoning do the mental “institutions” of Foucault’s nightmares ever arrive, which led many historians like Midelfort and later, more famous scholars like Roy Porter to deny Foucault’s ideas about the “Great Confinement,” because they were generally based on incorrect facts, historical errors, and temporal confusion in Foucault’s apparently jaded research. To this end, the Enlightenment brought a newfound schism on how madness was viewed and dealt with between scholars that now began to directly associate with the mad, for better or for worse.⁴⁶

Enlightenment Unification Behind Reason, and the First “Schism”(17th-19th c. CE)

The Enlightenment—if we allow for some time leading up to its start and even after its supposed end, particularly the 17th to 19th centuries—was the most transcendent era for paradigm change in the creation and perception of madness as a concept. Here, I will discuss this change and its subsequent wide-ranging implications across the discourse in-depth. There was first an initial unification of scholars



behind reason and logic that led to a new perception of madness away from the confused mix that had remained until the 16th century. There was then a schism amongst scholars during the Enlightenment that caused about half

of scholars within the discourse of madness to revert to Hippocratic thought that madness was disease and needed to be gently treated and helped, while the other half saw through the lens perpetuated by the aforementioned Inquisition-like thought that madness symbolizes dangerous, animalistic unreason.

Finally, there was the development of mental hospitals and mental asylums that aligned with the two

⁴⁵ Ibid., 7-8.

⁴⁶ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 60.

halves of scholarly thought towards madness with the hospitals serving and attempting to heal those who were seen as being diseased and the asylums institutionalizing and experimenting on those who were seen to be dangerous and animalistic. These two sides would continue even into our modern day with the new psychiatric age that I discuss later in the paper.

Although renowned French philosopher Rene Descartes preceded the Enlightenment by a half-century, his ideas about madness seemed to set the stage for this era's great paradigm change. Famously, Descartes' argument was the topic of a decade-long debate about madness between Michel Foucault and Jacques Derrida, two of the most pivotal figures in 20th-century historical and philosophical academia. Of the most important points in Descartes' ideas about madness was his belief that there was no distinction between madness and reason, whereas the previous era discussed above contained budding beliefs that madness was dangerous and represented animalistic traits in man.⁴⁷ In a way, Descartes believed that madness was no more than hidden reason masked by violent side effects. If anything, the mad were to be studied and understood, particularly their dreams, as they had gained knowledge by being mad that normal, reasonable people could never receive.⁴⁸ While the Enlightenment highlighted the importance and value of reason, it was Descartes' refusal to make a distinction between madness and reason that originally laid the foundation of Enlightenment thought towards madness. Descartes' theories about madness reunified thought amongst Enlightenment scholars from the end of the 17th century to the beginning of the 18th century that was previously lacking in the aforementioned "mixed" period where madness was viewed as both positive and negative.

At the beginning of the 18th century, and as Descartes' ideas began to fade from the minds of scholars, what I refer to as the "Enlightenment Schism" took place amongst scholars concerned with madness. Approximately half of these scholars stayed true to Descartes' ideas and Hippocratic morality

⁴⁷ Jeffrey L. Powell, "An Enlightened Madness," *Human Studies* 25, no. 3 (2002): 311.

⁴⁸ *Ibid.*, 314.

that madness is something to be studied, cured, and cared for, whereas the other half of scholars turned away from these ideas and back towards old religious thought that plagued the “mixed” period.⁴⁹ However, it was no longer mixed where scholars could believe both at the same time, rather it was a period of complete intellectual conflict. Each side’s supposed solution to the problem of madness represents these thoughts, and thus I will discuss their subsequent response to each other.

In coming to terms with madness, the Descartes-inspired scholars sought curable methods of care for the mad. In the lexicology of creating madness during this period, we begin to see the “diminished status of mental illness” taking the place of negative concepts for madness, a landmark point in the changing vocabulary that persists in the modern world.⁵⁰ A relative continuation of something like Emma de Beston’s “punishment” followed this new status of madness. The mad would be cared for in the home, sent to hospital-like monasteries, or studied inside of mental institutions. These were unlike what I will discuss in a paragraph below with the asylums, rather these institutions were similar to hospitals where the subject could be watched, treated, and kept in a state that was not harmful to themselves or society. However, the most noticeable difference between this approach and the more negative one that I will discuss soon is the mindset that scholars and researchers took towards the mad. In these people’s eyes, the mad were victims of a disease. To them, madness was pathological and worthy of care.⁵¹ Close one-on-one contact with the mad was utilized to treat specific mental illnesses, and interpersonal communication between researcher or doctor and patient became the leading method of dealing with madness.⁵²

While one side of scholars and researchers took a caring hand to mental illness, the other side was not so understanding and curious about curing. Rather, the creation of mental asylums became a

⁴⁹ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 102.

⁵⁰ Shoshana Felman, “Madness and Philosophy or Literature’s Reason,” *Yale French Studies* 52 (1975): 211.

⁵¹ R.A. Houston, “Madness and Gender in the Long Eighteenth Century,” *Social History* 27, no. 3 (October 2002): 311.

⁵² Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 102.

solution in which the mad could be imprisoned, scrupulously experimented on, and dealt with away from the prying and caring eyes of society's understanding people.⁵³ To this side of scholars, the mad were "wild beasts" prone to dangerous, violent tendencies that required "brutal taming" to protect society.⁵⁴ Particularly evident in English institutions such as Bethlem and St. Luke's Asylum, researchers encouraged and practiced psychological bullying, bloodletting, lobotomizations, and routine experimental medications.⁵⁵ These asylums got away with these horrible and gruesome forms of torture by claiming that they were developing "moral therapy," that is emphasizing structured community life while applying methods of gently reconditioning behavior. In this way, madness was clearly being viewed as the "other," something wholly different and unable to be understood by rational minds of society, and in many cases it is something entirely dangerous to society as well.⁵⁶

These two sides represented the Enlightenment schism that I place so much emphasis on within this paper. While they may seem simple enough to understand, these two sides of Enlightenment thought established the framework for modern ideas towards madness that would persist into our modern day world. The idea of *tragic* knowledge arose out of sentiments towards madness in which the very term evokes fear of what comes from the mad. While there was a unification of "reason" in the enlightenment, it was also a point in which scholars became divided on the issue, thus some believing madness to be a harmless disease needed to be researched and treated with care and some believing madness to be a dangerous form of tragic knowledge that could perhaps corrupt reason and normality.⁵⁷ If the *Hippocratic Corpus* and subsequent "mixed" period developed structured ideas and concepts for madness, this Enlightenment period completely turned the discourse on its head and rewrote ideas about madness with actual, physical action. There was no more theorizing or humoral medical methods

⁵³ Ibid., 102.

⁵⁴ Ibid., 100.

⁵⁵ Ibid., 103.

⁵⁶ Shoshana Felman, "Madness and Philosophy or Literature's Reason," *Yale French Studies* 52 (1975): 213.

⁵⁷ B. Keith Putt, *The Essential Caputo: Selected Writings* (Bloomington: Indiana University Press, 2018), 167.

employed, rather these two sides knew for a fact what the mad were—in their minds—and set in stone ideas about madness that most western societies still believe today.

Psychiatric Ideals, Modern Psychology, and Psychotropic Medicine (20th-21st c. CE)

The “Age of Psychotropic Medicine,” as it has been called by some scholars within medical discourses, perpetuated Enlightenment ideals that resulted in a schism between the two competing perceptions of madness. Likewise, Western European society of the 20th to 21st century has begun to lean on psychology, therapy, and psychotropic medicine—that is, drugs that affect the mind and psychology directly—in efforts to either subvert or cure madness, or mental illness as it is called today. However, the cases have remained the same in how society perceives and deals directly with was we know as madness. Enlightenment ideals on both sides have persevered amongst ancient ideas, but they are now found both within caring methods of psychological therapy and assistance under the diminished status of “mental illness,” while also within typical methods of shutting away or institutionalizing “insanity” and “madness” with psychotropic medicine and modern institutions that act as asylums.⁵⁸

It is difficult to tell nowadays how society views madness. Psychological institutions and psychologists or psychiatrists themselves claim to care for those with mental illness. They seemingly seek to help and heal those who have gone mad, and while “madness” is not a term that is often used anymore, it seems as though

society still treats them as such.

The rise of Somatic psychiatry, that is the idea that mental illness can be cured through psychotropic therapy and



⁵⁸ Joan Busfield, “The Female Malady? Men, Women, and Madness in Nineteenth Century Britain,” *Sociology* 28, no. 1 (February 1994): 260.

medical drugs due to its direct association with the brain, originally emerged from these confused modern ideas about mental illness in the late 19th century but most heavily in the early 20th century.⁵⁹ Since then, thoughts towards mental illness have been more concerned with what went wrong in a person's mind as opposed to methods of cure.⁶⁰ In this way, society has strayed yet again from Cartesian ideas of caring for the mad. We can look at the thousands of modern focus groups, millions of psychiatric therapists, and countless supposed "quick cures" for mental illness, but the truth is, the other side of asylum autocrats has won out.

The "Big Pharma Revolution" of psychotropic medicine has replaced the asylums of old in the way that most psychologists and psychiatrists, but not all, choose to blindly medicate instead of treating those with mental illness.⁶¹ This all stems from a paradigm shift in reasoning that mental illness represents a "crisis of meaning," and in a way the people pushing these forms of treatment enable this renewed feeling that *madness* is something to be tossed away, checked, and brutally dealt with to avoid further harm to the rest of society.⁶² I believe that they view mental disorders as exactly that: dis-order. While not all of western society is guilty of such a belief, it can be generally stated that this push for psychotropic medicine is representative of wanting a quick fix without much effort, simply because people cannot and have not been able to understand madness for millenia. This is truly where one can view the idea starting to *permanently* emerge that mental illness should be shut away. In this way, modern psychology is no better than the asylums and prisons meant to entrap and hold the mad so they do not harm society.

My Attempt at a Structured Concept for Madness

⁵⁹ Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2013), 144.

⁶⁰ Ibid., 157.

⁶¹ Ibid., 205.

⁶² Briege Casey and A. Long, "Meanings of Madness: A Literature Review," *Journal of Psychiatric and Mental Health Nursing* 10 (2003): 89.

Renowned post-Enlightenment German philosopher Georg Wilhelm Friedrich Hegel gave what I believe to be a perfect description of how human society struggles to cope with even the most basic concept surrounding madness. He argued that human society is a divided one which enables “the phenomena of madness ... to reveal [the] human struggle with guilt and the nature of evil.”⁶³ In essence, and at the very least how I have come to understand this, we—as humans—allow ourselves to fear madness and enable it to become something inherently different from us. Fear of the unknown is one of the primary reasons for tens, hundreds, thousands of atrocities, sentiments of indifference, political division, and so much more. Madness is in no way any different in the manner that the natural, inherent desires of normality within the human worldview causes all of us to push aside that which pushes back against the safe, comforting “normal”. In this way, all of these historians that for five-plus decades since the blossoming of the discourse with Foucault’s writings have over complicated and nuanced so simple of a concept to understand the relationship between human society and the mad.

In this way, and as crazy as it may appear, Foucault remains the scholar who comes closest to being correct in his understanding of *why* society perceives and defines madness in the various ways that it does. However, I modify this with the underlying truth that somewhat encompasses aspects of all the important scholarly theories on the matter; at its core, I truly believe that ‘madness’ can be viewed as a wide-ranging societal battle of ‘reason’ against ‘unreason’. In layman’s terms, it is a perpetual conflict between what we know and what we do not. Similarly to Southeast Asian historian Edward Said’s theory of orientalism, the ‘orient’ was inherently differentiated from the ‘normal’ as a way for society to, in a way, snuff out or push aside what they do not understand. It is in our very nature as humans and always has been. Most modern mental “institutions”—be it asylums, homes for the mentally ill, prisons, and even the metaphorical institutions of psychotropic medication—still do not accomplish their goals of rehabilitation. Rather, they lock away prisoners for long periods of time in a structured, closed-off

⁶³ Daniel Berthold-Bond, “Hegel on Madness and Tragedy,” *History of Philosophy Quarterly* 11, no. 1 (January 1994): 73.

lifestyle completely removed from the public eye as a way to separate and hide what society cannot cope with. I view this battle of reason and unreason in the very same light.

Where I differ from Foucault is in my belief that madness has always been more a problem of mental health and social functioning as opposed to an issue in power relations as Foucault and his fellow post-structuralists might argue. Instead, I view it as the so-called “rational” people fearing the possible



dangers that mental unreason may pose, which is a product of many things including long-held beliefs that normality is the only correct mental state.⁶⁴ Identifying and enforcing societal structure against madness and the mad themselves is not inherently an oppressive act, rather it is one of fear towards the unknown.⁶⁵ It could be argued in this way that madness is not a

societal construct, as Foucault might argue, but instead it is a human construct.⁶⁶ Likewise, it could also be seen as the hermeneutics of a crisis of identity, of subconsciously *not knowing* who we are or at least being uncomfortable with any kind of identity at all.⁶⁷ Poststructuralist thinkers would argue for a process of “meaning-making” in society, but I just do not see it with that much complexity.⁶⁸ In the end, I believe it is simple. We—as humans—have the inherent desire to set ourselves apart from what makes

⁶⁴ R.A Houston, “Madness and Gender in the Long Eighteenth Century,” *Social History* 27, no. 3 (October 2002): 325.

⁶⁵ *Ibid.*, 311.

⁶⁶ Joan Busfield, “The Female Malady? Men, Women, and Madness in Nineteenth Century Britain,” *Sociology* 28, no. 1 (February 1994): 261.

⁶⁷ B. Keith Putt, *The Essential Caputo: Selected Writings* (Bloomington: Indiana University Press, 2018), 164.

⁶⁸ Briege Casey and A. Long, “Meanings of Madness: A Literature Review,” *Journal of Psychiatric and Mental Health Nursing* 10 (2003): 90.

us different, what we inherently fear, which has created this entire dichotomy between reason and unreason.

It is within cases like Emma de Beston's, those struck with the "sacred disease," and millions of other victims throughout the recorded history of Western Europe that we find this argument in action. Humans, even in phenomenon not including madness, have always autonomously shut away that which they do not understand. At some point in history, humanity has lost the logic and reason that it gained through those Enlightenment thinkers that stood content to *understanding* madness instead of most other thinkers that wished to lock the metaphorical jail and throw away the key. Scholars like Porter and Foucault have nuanced our understanding of humanity's treatments towards madness so much that it becomes confusing and jaded to those wondering how and why madness has been dealt throughout history in the aforementioned ways. There is some fear amongst myself and other scholars that because of this forgetful attitude, Foucault may be correct and Porter might be wrong that madness will be completely forgotten to humanity at some point. Either those people will be forcefully assimilated into society or medicated and shut away to a point where madness no longer exists altogether; at least on the surface, it does not exist. However, that is exactly what makes this realization so important, as Madness is simple, black-and-white. Our treatment of it is subsequently clear in that we, as humans, fear and turn away from that which is inherently different, the "other." While I have hope for the future, this simple reality will seemingly stay a perpetual truth of human society.

Concluding Thoughts

Through all of this research, I have come down to the solid and unwavering opinion that it has forever been inherently within human nature to battle against the unknown in a conflict and dichotomy of 'reason' opposing 'unreason'. While I cannot speak for modern psychiatry and psychotropic medical practices, I believe that Foucault comes close - just missing the mark - to the true answer as to why western society has stigmatized madness in the various ways that it has throughout recorded history.

All-in-all, I believe madness to be not a social construct, but rather a human construct built from fear of the unknown and the everlasting, egotistical idea that ‘madness’ forever opposes a supposed and foundational ‘normality’. I believe the two primary reasons for a lack of scholarship on madness are people’s fear of the unknown, nearly inexplicable concept of madness itself and an inherent human wonder as to why researching something as jaded and impossible to explain as madness is useful to the overall field of history.

To this, I would argue that it is a natural sense of desire to explore the history of those without a voice. Just as in gender and sexuality history, people without a voice in history may be eventually be lost to time if not scrupulously studied and queried. In this way, I saw madness as the perfect subject to give people a voice, because in many cases they had no voice; being shut away and ignored for nearly all of recorded history, be it declared the “other” in society and subsequently ostracized, shut away in asylums, or medicated and told to be at peace with having a so-called “mental illness”. It should be the prime goal of the historian to not only give these people a voice, but get down to the brass tacks of how and why they have been marginalized throughout history and what this says about societal relationships between them and those who are considered normal. With that said, I believe this paper justly attempts to give a voice to the mad’s history; or at the very least explores and reveals the marginalization that has occurred throughout recorded history in an effort to recognize the mad themselves instead of shutting them away as society has done for centuries. To all future historians, I might echo fellow authors within the discourse by asking: how can we know where reason stops and madness begins?⁶⁹ Madness and reason are, after all, inextricably linked because one is the absence or “other” of thought and one is the supposed epitome of normality. How might we ever tell the difference if the future of the discourse continues to prevent the mad from regaining their own freedom?⁷⁰

⁶⁹ Shoshana Felman, “Madness and Philosophy or Literature’s Reason,” *Yale French Studies* 52 (1975): 206.

⁷⁰ B. Keith Putt, *The Essential Caputo: Selected Writings* (Bloomington: Indiana University Press, 2018), 165.

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